

**IL HIE Advisory Committee  
Behavioral Health Work Group  
Meeting Notes  
August 1, 2013**

**Attendees (all by phone)**

Connie Christen, Illinois Department of Healthcare and Family Services  
Kim Darnstaedt, The H Group  
Eric Foster, Illinois Alcoholism and Drug Dependence Association  
Krysta Heaney, Office of Health Information Technology (OHIT)  
Jim Hobbs, Department of Human Services  
Marvin Lindsey, Community Behavioral Health Association of Illinois  
Emily Miller, Illinois Association of Rehabilitation Facilities  
Mike Ouska, Lutheran Social Services  
Meryl Sosa, Illinois Psychiatric Society  
Lora Thomas, NAMI  
Steve Vanderpoel, Chicago Children's Center for Behavioral Health

**Review of Minutes**

The work group approved the meeting minutes from the June 6<sup>th</sup> call.

**Illinois Health Information Exchange (ILHIE) Advisory Committee and OHIT Update**

- **Illinois HIE Regional Workgroup**
- **Patient Choice and Meaningful Disclosure Workgroup of the ILHIE Authority Board**
  - **Subgroups**

**Krysta Heaney** reported that the advisory committee is accepting applications for new members of the committee. The Illinois Health Information Exchange (HIE) Authority met and approved 20 positions for the committee and there are ten open slots. The Governance work group will review the applications and new members will be named this fall. Krysta will send the application to Connie Christen to distribute to this work group.

Krysta said that a kickoff meeting was held for a stakeholder engagement process that is centered around developing recommendations and providing input for the patient consent policy's that will govern the exchange of data through the HIE. Specifically a lot of the work is centered around the requirements that are in HB1017. Three new work groups are being convened which are the Patient Choice and Meaningful Disclosure at the Point of Care, Patient Choice Preferences and Data Security, and the Breach Response Protocol work groups. Two work group meetings are being held next week and anyone that would like to attend is welcome. **Marvin Lindsey** commented that the Patient Choice and Meaningful Disclosure work group members consists of hospitals, regional HIE's, Walgreens, behavioral health providers, technology companies, and managed care organizations. Marvin is a member of the specially protected health information sub-group. They have two deliverables. One is to develop policy recommendations for the disclosure of specially protected health information within the context of the HIE. The second is for policy recommendations for the handling of patient requests for restrictions on disclosure of specific health information in the HIE.

### **Behavioral Health Integration Project Resource Webpage Update**

**Marvin** indicated that Dia Cirillo was not able to make today's call but said that the website is moving forward and plans are to have it completed in the next couple of months.

### **Information Technology Resources for Behavioral Health Infrastructure**

**Jim Hobbs** referred to the last work group call in which the Health Information Technology initiatives was discussed. The initiatives are a mechanism for DHS to track their initiatives that they are engaged in such as the Framework and the Integrated Eligibility Systems project. It had appeared that the grant was available to others when in fact it is not.

**Marvin Lindsey** reported that mental health organizations were approached by Senator Heather Steans regarding funding for a \$395,000 settlement received and asked the organizations for recommendations on what to do with the funding. Suggestions included developing an information technology infrastructure for behavioral health care providers since behavioral health care providers are not included in the federal Payment Incentive Program. It was decided to recommend that the funding be used for grant awards for the adoption of federally certified electronic health records (EHR) system (or expansion of an existing EHR) for mental health providers. OHIT was contacted and they developed recommended specifications for behavioral health EHR's. To receive any of the funding, organizations have to identify two other behavioral health care organizations that will participate in their EHR expansion. Additional criteria are that grant awardees must share their customer base with a primary health care provider in their region and that they currently share referrals with that provider. The recommendations have been submitted to the Attorney General's office for approval.

**Marvin** and **Eric Foster** suggested that the work group look into making recommendations to the ILHIE Advisory Committee concerning health information technology resources for the behavioral health community.

The next call is scheduled on October 3<sup>rd</sup>. Meeting adjourned.